. Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 Open to Public Inspection

Occariment of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public Information about Form 990 and its instructions is at www.irs.gov/form990

A F	or the	2014 calendar year, or tax year beginning and e	nding							
B C	neck if	C Name of organization		D Employer identification	ation number					
	Addre	NATIONAL LEGAL AND POLICY CENTER								
	Name	Doing business as	52-17	50188						
	initial return Final returni	107 PARK WASHINGTON COURT	Room/suite	E Telephone number (703)	237-1970					
	termin			G Gross reccipis \$	1,273,934.					
	Ameni		H(a) Is this a group ret	urn						
	Applic	F Name and address of principal officer PETER T. FLAHERTY	for subordinates?	Yes X No						
	pendii	SAME AS C ABOVE		H(b) Are all subordinates inc	luded7 Yes No					
1 Tax exempt status X 501(c)(3) 501(c)() (Insert no) 4947(a)(1) or 527 If "No," attach a list (see instructions)										
J Website ► WWW . NLPC . ORG										
		organization X Corporation Trust Association Other	L Year o	of formation 1991 M	State of legal domicile DC					
Pa	rt I	Summary								
Activities & Governance	1	Briefly describe the organization's mission or most significant activities ${\hbox{\tt TO}}$ ${\hbox{\tt ED}}$ THROUGH RESEARCH, DOCUMENTATION, AND THE	DISSE	THE GENERAL MINATION OF	PUBLIC					
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	ets					
ove	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	5					
8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3					
es a	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	5					
ž	6	Total number of volunteers (estimate if necessary)		6	0					
t ct	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
	b	Net unrelated business taxable income from Form 990 T, Irne 34		7b	0.					
				Prior Year	Current Year					
ď		Contributions and grants (Part VIII, line 1h)	-	1,231,800.	1,210,506.					
ie i		Program service revenue (Part VItI, line 2g)	<u> </u>	1,297.						
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	0.	- <022.2					
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	1,233,097.	1,209,684.					
_		Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	1,203,004.					
		Grants and similar amounts paid (Part. IX. column. (A), Ines-1-3)	-	0.	0.					
		Benefits paid to or for members (Rart (X collumn (A)) line 4)	⊢	759,334.	784,291.					
Expenses		Salaries, other compensation, employee-benefits (Part IX column (A), lines 5 10)	\vdash	0.	0.					
)en	160	Professional fundraising tees (Part IX, column (A), line 1 6 7 222, 32	16. H							
Exp	17	Other expenses (Part IX, column (A), lines 11a 11d, 11[249])	<u> </u>	448,724.	441,771.					
		Total expenses Add lines 13 17 must equat Part (Xxcolumn (A), line 25)		1,208,058.	1,226,062.					
	19	Revenue less expenses Subtract line-18 from line-12.		25,039.	<16,378.					
or s			Be	ginning of Current Year	End of Year					
let Assets or and Balances	20	Total assets (Part X, line 16)		1,016,027.	1,034,878.					
ABs		Total liabilities (Part X, line 26)		119,524.	135,353.					
Net	22	Net assets or fund balances Subtract line 21 from line 20		896,503.	899,525.					
	irt II	Signature Block								
		illies of perfilly, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is					
true,	correc	ot, and complete. Declaration of preparer (other than officer) is based on all information of while	ch preparer	has any knowledge.						
10/24/1										
Signalure & Officer Date										
Here PETER T. FLAHERTY, PRESIDENT Type or print name and title										
				Date / Creck	PTiN					
Del 4		Pinitype preparer's name Preparer's signalure ONABLES E HELME TIT CDA	1:24	10/23/15	mn0110453					
Paid		CHARLES F. HELME III, CPA Cleby J. / Jeline 1-1	-1(111	Sett-employed	P00118452 54-1029635					
Prep Use		Firm's name THOMPSON GREENSPON Firm's addiess 4035 RIDGE TOP RD, SUITE 700		Firm's EIN ▶	J4-1023033					
USC	Unity	FAIRFAX, VA 22030		Phone no (76)3)38 5-8 888					
May the IRS discuss this return with the preparer shown above? (see instructions)										

LHA For Paperwork Reduction Act Notice, see the separate instructions 432001 11 07-11

Form 990 (2014)

Form	990 (2014) NATIONAL LEGAL AND POLICY CENTER	52-175	0188	Page 2
	t III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			X
1	Bnelly describe the organization's mission			
•	TO EDUCATE THE GENERAL PUBLIC THROUGH RESEARCH, DOCUMENT	NOITA	AND	THE
	DISSEMINATION OF INFORMATION ON NONPARTISAN ISSUES RELAT			
	TO ETHICS AND ACCOUNTABILITY, INCLUDING THE CODE OF ETH			
	GOVERNMENT SERVICES.	.cb ron		
2	Did the organization undertake any significant program services during the year which were not listed on		<u> </u>	X No
	the prior Form 990 or 990 EZ?		Yes	סא רעין
	If "Yes" describe these new services on Schedule O			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	•	LJYes	X No
	If "Yes," describe these changes on Schedule O			
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by	expense	s
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other			
	revenue, if any, for each program service reported	·		
4a	225 520	.n. S		1
74			IN	
	CORPORATE GOVERNANCE, INCLUDING HONESTY AND FAIR PLAY IN			TPS
			THE	
	CENTER EXPOSES AND PUBLICIZES THE INFLUENCE OF CORRUPT (TE	
	EXECUTIVES ON PUBLIC OFFICIALS AND THE POLITICAL SYSTEM	•		
46	(Code) (Expenses \$ 194,559 · including grants of \$) (Nevent	۰.0 5		
4b	ORGANIZED LABOR ACCOUNTABILITY PROJECT. THIS PROJECT FOO		и тнь	·
	ACCOUNTABILITY OF LABOR UNIONS AND THEIR CORRUPTING INFI			<u> </u>
			THE	
~				
	GENERAL PUBLIC THE POLITICAL ABUSES OF THE LABOR UNIONS	AND IU		
	UNETHICAL AND CRIMINAL BEHAVIOR OF LABOR UNION LEADERS.			
		_		
40	(Code) (Expenses \$ 404,150. including grants of \$) (Revenue	ia S		<u></u>
70	GOVERNMENT INTEGRITY PROJECT. THIS PROJECT FOCUSES ON THE			—— '
	ACCOUNTABILITY AND ETHICS OF GOVERNMENT BUREAUCRACIES AN		OVERO	
	PUBLIC UNETHICAL OR ILLEGAL PRACTICES OF GOVERNMENT AGE	NCIES,	PUBLI	<u>.c</u>
	OFFICIALS, AND GOVERNMENT EMPLOYEES, AS WELL AS ORGANIZA	ATIONS	AND	
	INDIVIDUALS THAT IMPACT THE GOVERNMENTAL PROCESS.			
44	Other program services (Describe in Schedule O)			
40	22.766		,	
_	0.40 0.14		-	
<u>4e</u>	Total program service expenses 848, U14.		E (990 (2014)
			rarm (JUU (20 14)

Form 990 (2014)

Is the organization described in section 501(c)(C) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributor/2 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 L X Section 501(6)(3) organizations, Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 5 Lis the organization as section 501(6)(4) 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98 197 If "Yes," complete Schedule C, Part III 5 Lis the organization assertion stolle(3) 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98 197 If "Yes," complete Schedule C, Part III 5 Lis the organization assertion stolle(3) 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98 197 If "Yes," complete Schedule C, Part III 5 Lis the organization required roll of accessivation days or was mind under organization received in Old a conservation days or was mind under some organization received in Old a conservation casternest, including essements to preserve open space, the environment, historic land axeas, or historic assertion organization received in Old a conservation of an intended programization received in Old accessive of an intended researce, or other sented asserts organization for amounts in Part X in Part X, the 21, for escribe Schedule C, Part III 5 Did the organization report an amount in Part X, the 21, for escribe schedule account liability, school as a custod an for amounts or other school and assets in temporary restricted endowments, permanent endowments or quase endowments? If "Yes," complete Schedule C, Part IV III	Par	t IV Checklist of Required Schedules			
I X X X X X X X X X				Yes	No
I X X X X X X X X X	1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2 Is the organization required to complete Schedule B, Schedule G Contributions 2 Did the organization engage in direct or indeed political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax yea? If 'Yes,' complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule S 19:11 If 'Yes,' complete Schedule C, Part III 6 Did the organization maintain any opinion advised funds or any similar funds or accounts for which didnors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule C, Part II 7 Did the organization report an amount in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X or provide credit counseling, distributions, etc. The organization report an amount in Part X, line 19:1, for escrive or custodial account liability, serve as a custodian for amounts in clisted in Part X or provide credit counseling, distributions, etc. The organization report an amount for investments, distributions, etc. The organization report an amount for investments organization, held assets in temporality restricted endowments, permanent endowments or quase andownents or any other broading assets reported in Part X, line 16:11 If 'Yes,' complete Schedule D, Part V ii b) Did the organization report an amount for investments. program related in Part X, line 10:11 If 'Yes,' complete Schedule D, Part X ii c) Did the organ	·	•	1	Х	
De the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offices of "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? "If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? Section 501(c)(3) organizations called the organization management and an amount or proceed advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule 0, Part II Did the organization maniform contections of works of an instorical treasures, or other similar basels? If "Yes," complete Schedule 0, Part II Did the organization maniform contections of works of an instorical treasures, or other similar basels? If "Yes," complete Schedule 0, Part II Did the organization in amount in Part X, line 21, for escrow or custodial account habitaly, serve as a custodian for amounts not listed in Part X for provide oredic counseling, debt management, credit repair, or debt inegotiation services? If "Yes," complete Schedule 0, Part IV If the organization report an amount for limit basels in temporarily restricted endowments, permanent endowments or quasis endowments? If "Yes," complete Schedule 0, Part IV Did the organization report an amount for limit basels in the securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule 0, Part IV Did the organization report an amount for other habities in Part X, line 13 that is 5% or more of its total assets reported in Part X line 167 If "Yes," complete Schedule 0, Part IV Did the organization report an am	2		2	X	
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Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II S is the organization a section 501(h) e10(s) or 501(c)(s) or 501(c)(s) or 501(c)(s) organization maintain any oranor advasted, funds or any amount as defined in Reviewe Procedure 98 191 If "Yes" complete Schedule C, Part II Did the organization maintain any opanor advasted funds or any similar funds or accounts for which donors have the right 10 provide advice on the distribution or investment of amounts in such funds or accounts for Which donors have the right 10 Did the organization maintain collections of works of an instorical resaures, or other smaller assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of an instorical resaures, or other smaller assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of an instorical resaures, or other smaller assets? If "Yes," complete Schedule D, Part II Did the organization report an amount for Part X, line 21, for escroy or custodial account liability, serve as a custodian for amounts not itsed in Part X is provide credit counseling, debt management, credit repair, or debt inegotiation services? If "Yes," complete Schedule D, Part IV II the organization services or year or custodial account liability, serve as a custodian for amounts not itsed in Part X is provide credit counseling, debt management, credit repair, or debt inegotiation services? If "Yes," complete Schedule D, Part IV II the organization services or year as applicable and the organization report an amount for land, buildings, and ergupment in Part X ine 10° If "Yes," complete Schedule D, Part IV II The C and II The Schedule D, Part IV II The Sch	3		3		Х
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8 Did the organization maintain collections of works of ari, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 10 Dio the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Dio the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments or quasi endowments? If "Yes," complete Schedule D, Part V 11 If the organization included in control that in the organization report an amount for listed between the organization report and amount for listed between the organization report an amount for listed sassets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 12 Did the organization report an amount for ormestments of their sesses in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 14 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII 16 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII 17 Did the organization behalf in the part X line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII 18 Did the organiza	′		7	ĺ	x
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9 Dio the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Dio the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments or quasi endowments? If "Yes," complete Schedule D, Part V 11 If the organization or anomator to raind, buildings, and equipment in Part X line 10? If "Yes," complete Schedule D, Part V 11 Dio the organization report an amount for investments of the securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11 Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X 12 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 12 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 12 Did the organization included in consolidated financial statements for the tax year richude a looinote that addresses the organization in subsity for uncertain tax positions under FIN 48 (ASC 730)? If "Yes," complete Schedule D, Part X 11 X	8				v
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Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the Tax year? If "Yes" and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 15b Did the organization have aggregate revenues or expenses of more than \$10,000 from granimaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15c Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16c Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 17c Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II 18D Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 18D Did the organization operate one or more hospital facilities? II "Yes," complete Schedule H 19D Did the organization operate one or more hospital facilities? II "Yes," complete Schedule H	_		 -		
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If "Yes " and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the United States? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from granimaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? II "Yes," complete Schedule H		·	128		
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H 20a X	16	-	10		l x
complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	10		۳,	-	 -
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		10		Ιx
	20.0				

Х Form 990 (2014)

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Note All Form 990 filers are required to complete Schedule O

Form 990 (2014)

14a

Х

organization is licensed to issue qualified health plans

14a Did the organization receive any payments for indoor fanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c. Enter the amount of reserves on hand

13b

13c

52-1750188 NATIONAL LEGAL AND POLICY CENTER Form 990 (2014) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b. Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х 7b persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? Х 8ь b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VIt, Section A, who cannot be reached at the organization's mailing address? If "Yes " provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No Х 10a 10a Did the organization have local chapters, branches, or affiliates? b. If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15a a The organization's CEO, Executive Director, or top management official Х 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Χ taxable entity during the year? 16a b. If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) X Another's website Upon request 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records THE CORPORATION - (703)237-1970 107 PARK WASHINGTON COURT, FALLS CHURCH, VA 22046

Form 990 (2014)

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VtI

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Emptoyees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0 in columns (Ď), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report able compensation (Box 5 of Form W 2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organizat (A)	(B)	Average Position (do not check more than one pox unless person is both an			C)			(D)	(E)	(F)
Name and Title					than		Reportable	Reportable	Estimated	
	hours per week						compensation from	compensation from related	amount of other	
	(list any	ā						the	organizations	compensation
	hours for	8				<u></u>		organization	(W 2/1099 MISC)	from the
	related	1 25	r csa.		۱.,	25.00		(W-2/1099 MISC)		organization
	organizations below	E I	lt c		e,clo	5 2				and related organizations
	line)	Ingredual frustea or greeter	ระบบ เลาสาย เการณา	Officer	se, cloma yas	· 13-est compensated employee	former			organizations
(1) KENNETH F. BOEHM	40.00	<u> </u>	=		Î	٠	3			
CHAIRMAN		х		X				225,000.	0.	35,969.
(2) PETER T. FLAHERTY	40.00									
PRESIDENT/DIRECTOR		Х	<u> </u>	X		Ļ		227,822.	0.	38,979.
(3) DAVID WILKINSON	0.50					-			_	_
DIRECTOR		Х			<u> </u>	<u> </u>		0.	0.	0.
(4) MICHAEL FALCONE	0.50	x						0.	0.	0.
DIRECTOR (5) KURT CHRISTENSEN	0.50	12	-	_	-	├		0.	0.	- 0.
DIRECTOR	0.30	х				l		0.	ο.	0.
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NATIONAL LEGAL AND POLICY CENTER

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Form 990 (2014)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part tX Management and general expenses Do not include amounts reported on lines 6b. Fundraising expenses Total expenses Program service 7b, 8b, 9b, and 10b of Part VIII expenses Grants and other assistance to domestic organizations and domestic governments. See Parl tV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 4 Benefits paio to or for members 5 Compensation of current officers, directors, 527,771 461,362 39,729. 26,680. trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 178,693. 170,037. 8,589 67. 7 Other sataries and wages Pension plan accruals and contributions (include 2,400. 2,400 section 401(k) and 403(b) employer contributions) 961. 40,826. 37,397 2,468 Other employee benefits 31,320. 34,601. 2,225 056. 10 Payroll taxes 11 Fees for services (non employees) a Management 7,529 7,529. b Legal 34,534. 34,534 c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, 1,879. 26,277. 24,364 34 column (A) amount, list line 11g expenses on Sch O) 12 Advertising and promotion 17,951 81,080. 62,317. 812. 13 Office expenses 848. 27,716. 21,203. 5,665. 14 Information technology Royalties 15 137. 27,219. 3,353. 23,729. 16 Occupancy 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 690 207. 6,069. 5,172. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 12,275. 3,069. 15,344. 22 Depreciation, depletion, and amortization 27,487. 21,992. 5,495. 23 Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 72,467. 29,655. 42,812. a PRINTING 70,785. 70,785. POSTAGE & SHIPPING 15,242. 14,173. 717. 352. BOOKS AND SUBCRIPTIONS С 12,499. 12,499. d RESEARCH 17,523. 3,298 14,225. e All other expenses 155,722. 1,226,062. 848,014. 222,326. Total functional expenses Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here It tallowing SOP 98 2 (ASC 958-720)

			(A) Beginning of year		(B) End of year
- 1	1	Cash non interest bearing	00-410	1	07 010
	2	Savings and temporary cash investments .	92,412.	2	87,210
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,		1	
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
i		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
<u>ء</u> ا		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable net		7	
۲	8	Inventories for sale or use		8	
i	9	Prepaid expenses and deferred charges	22,069.	9	22,523
i	10 a	Land buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 623, 377.			
	b	Less accumulated depreciation 10b 209,170.	429,551.	10c	414,207 314,016
i	11	Investments publicly traded securities	283,100.	11	314,016
	12	Investments other securities See Part IV, line 11		12	
	13	Investments program related See Part IV, line 11		13	
	14	Intangible assets	100 005	14	100 000
	15	Other assets See Part IV, line 11	188,895.	15	196,922
_	16	Total assets, Add lines 1 through 15 (must equal line 34)	1,016,027.	16	1,034,878
	17	Accounts payable and accrued expenses	20,058.	17	45,756
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
s	22	Loans and other payables to current and former officers, directors, trustees,			
[key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
ا "	23	Secured mortgages and notes payable to unrelated third parties		23	- ,
	24	Unsecured notes and loans payable to unrelated third parties		24	
	2 5	Other liabilities (including federal income tax, payables to related third			
		parties and other liabilities not included on lines 1724) Complete Part X of	00 466		00 507
		Schedule D	99,466.	25	89,597
	26	Total Ilabilities Add lines 17 through 25	119,524.	26	135,353
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ŝ		complete lines 27 through 29, and lines 33 and 34	0.64 113		070 553
Ĕ	27	Unrestricted net assets	864,113.	27	870,552
ga Q	28	Temporarily restricted net assets	32,390.	28	28,973
၉	29	Permanently restricted net assets		29	
2		Organizations that do not follow SFAS 117 (ASC 958), check here			
ŏ		and complete lines 30 through 34.			
Sci	30	Capital slock or trust principal, or current funds		30	
As	31	Paid in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Relained earnings, endowment, accumulated income, or other funds	006 503	32	000 505
- 1	33	Total labilities and net assets/lund balances	896,503. 1,016,027.	33	899,525 1,034,878

Form 990 (2014)

Form	1990 (2014) NATIONAL LEGAL AND POLICY CENTER	<u> 52-175</u>	0188	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X.
1	Total revenue (must equal Part VIII. column (A), tine 12)	1	1,20	9,6	84.
2	Total expenses (must equal Part IX, column (A), line 25)		1,22	2,0	70
3	Revenue less expenses Subtract line 2 from line 1	3			78.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			03. 75.
5	Net unrealized gains (losses) on investments	5		<i>J</i> , /	/5.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			7.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<u> </u>	1,3	75.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		001		~ ~
<u> </u>	column (B))	10	89	9,5	<u>25.</u>
Ра	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				لتا
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	. 0			х
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	d a.a.a	2a		
	If "Yes, check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	o on a			
h	Were the organization's financial statements audited by an independent accountant?		2b	х	
U	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	n hasis	120		
	consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the lax year, explain in Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audil		1	
	Act and OMB Circular A 133?	-	За		Х
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

Attach to Form 990 or Form 990-EZ

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NATIONAL LEGAL AND POLICY CENTER Employer identification number 52-1750188

ь.				AND TOBICI								
Рa		Reason for Public (e instructions					
he	organ	ization is not a private found	ation because it is (For lines 1 through 11, o	heck only	one box)						
1		A church, convention of chi	urches, or associatio	n of churches describe	d in sectio	n 170(b)(1)(A)(ı).					
2		A school described in secti	on 170(b)(1)(A)(ii) (i	Attach Schedule E)								
3		A hospital or a cooperative			ection 170	(b)(1)(A)(II	١}.					
4	$\overline{}$	A medical research organiz						the hospital's name,				
7		city, and state		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
_		An organization operated for	or the benefit of a co	lloge or university owner	d or operat	led by a or	wernmental unit describ	ned in				
5		=		nege or university owner	u oi opeiai	ieu by a gi	TVERTITIETITAL UTILL GESCHE					
	 1	section 170(b)(1)(A)(iv) (Complete Part II) A todays state or legal government or covernmental unit described in section 170(b)(1)(A)(v)										
6	=	A tederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v)										
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
		section 170(b)(1)(A)(vi). (Co	omplete Part II)									
8		A community trust describe	ed in section 170(b)(1)(A)(vi) (Complete Par	t II)							
9		An organization that norma	lly receives (1) more	than 33 1/3% of its sur	port from	contribution	ons, m <mark>emb</mark> ership fees, a	nd gross receipts from				
		activities related to its exen										
		income and unrelated busin										
		See section 509(a)(2) (Cor		, =====================================			, ,	·				
10		An organization organized a		ively to test for public sa	afety Sees	section 50	9(a)(4)					
10	=	An organization organized a						purposes of one or				
1 1		more publicly supported or										
								FIECK THE DOX III				
		lines 11a through 11d that		_								
a	l	☐ Type I A supporting orga										
		the supported organization	on(s) the power to re	gularly appoint or elect	a majonty (of the dire	ctors or trustees of the s	supporting				
	_	organization You must o										
b	L	Type II A supporting org	anization supervised	or controlled in connec	tion with it	s support	ed organization(s), by ha	ving				
		control or management o	f the supporting orga	anization vested in the s	ame perso	ons that co	introl or manage the sup	ported				
		organization(s) You mus	t complete Part IV,	Sections A and C								
С		Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with, a	and functionally integrate	ed with,				
_		its supported organizatio										
٦		Type III non-functionally						zation(s)				
ŭ		that is not functionally int										
		requirement (see instruct										
е	<u> </u>	Check this box if the orga					i Type i, Type ii, Type iii					
		functionally integrated, or	• •	nally integrated support	ing organi	zation						
f		er the number of supported o	=					L				
g		ride the following information			Kust to the e	************	(at Amount of monotony	(ul) Amount of				
	(i) Name of supported	(ti) EIN	(iii) Type of organization (described on lines 1.9	(IV) Is the o		(v) Amount of monetary	(vI) Amount of other support (see				
		organization		abovo or IRC soction		document?	support (seo Instructions)	Instructions)				
				(seo instructions))	Yes	No	mandenons/	i i i i i i i i i i i i i i i i i i i				
_												
_												
						 						
						1						
Tota	al			1	L	l		I				

t.HA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ 432021 09 17 14

Scheoule A (Form 990 or 990-EZ) 2014 NATIONAL LEGAL AND POLICY CENTER 52-17501 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
1	Gifts grants, contributions, and		-						
	membership fees received (Do not	ļ							
	include any "unusual grants ')	1,409,105,	1,251,074.	1,111,925,	1,231,800	1,210,506,	6,214,410,		
2	Tax revenues levied for the organ								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total Add lines 1 through 3	1,409,105.	1,251,074.	1,111,925.	1,231,800.	1,210,506.	6,214,410		
5	The portion of total contributions			1					
	by each person (other than a		1	ł					
	governmental unit or publicly								
	supported organization) included		ļ						
	on line 1 that exceeds 2% of the		İ						
	amount shown on line 11,			1					
	column (f)						491,693.		
	Public support Subtract line 5 from line 4						5,722,717.		
	ction B. Total Support								
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
7	Amounts from line 4	1,409,105.	1,251,074.	1,111,925.	1,231,800.	1,210,506.	6,214,410.		
8	Gross income from interest,			1					
	dividends, payments received on			Į					
	securities loans, rents, royalties			4 055	- 100	2 224	04 055		
	and income from similar sources	5,889.	4,835.	4,857.	5,180.	3,294.	24,055.		
9	Net income from unrelated business								
	activities, whether or not the				1				
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital		I						
	assets (Explain in Part VI)						C 730 465		
	Total support Add lines 7 through 10						6,238,465.		
	Gross receipts from related activities.					12			
13	First five years, If the Form 990 is for		first, second, thire	d, fourth, or lifth ta	x year as a section	n 501(c)(3)			
50	organization, check this box and stor ction C. Computation of Publ	here	rcentage						
_					1	241	91.73 %		
	Public support percentage for 2014 (olumn (1))		15	$\frac{91.73}{94.32}$ %		
	Public support percentage from 2013				4 - 00 4 600				
16	16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and								
	stop here. The organization qualifies as a publicly supported organization.								
	b 33 1/3% support test - 2013 If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
47.	and stop here. The organization qualifies as a publicly supported organization.								
177	17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,								
	and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Parl VI how the organization								
	meets the "lacts and circumstances" test. The organization qualifies as a publicly supported organization. b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
		•							
	more, and if the organization meets the organization meets the 'facts and circ						·		
10	Private foundation II the organization								
-10	Erivate roundation in the organization	an did not check a	00 x 011 mile 10, 10c	., 100, 17a, 01 170	, crieck tria bot a	na see matruction	·		

Part III Support Schedule for	Organizations	Described in	Section 509(a	1/21		rage 3
(Complete only if you check					art II. If the organiz	ation fails to
quality under the tests listed			ngarization tailed	to quality trider in	art ii ii iiie organizi	ation rails to
Section A. Public Support	Delow please com	piete Fart II)				
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and	(2) 2010	(6) 2011	(0)2012	(4) 2010	(0) 2014	(7) 70.01
membership fees received (Do not						
include any "unusual grants")						
2 Gross receipts from admissions,						
merchandise sold or services per- lormed, or facilities furnished in any activity that is related to the organization's tax exempt purpose						
3 Gross receipts from activities that				1		
are not an unrelated trade or bus						
iness under section 513						
4 Tax revenues levied for the organ						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						"
furnished by a governmental unit to	,					į
the organization without charge						
6 Total Add lines 1 through 5				1		
7a Amounts included on lines 1, 2, and	,			1		
3 received from disqualified person	s	1				
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the gleater of \$5,000 or 1% of the arrount on line 13 for the year.				Notes and a second of the seco		
c Add lines 7a and 7b						
8 Public support (Subtraction For fine 6)			_			L
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014_	(f) Total
9 Amounts from line 6					ļ	
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 laxes) from businesse	s			}		
acquired after June 30, 1975						
c Add lines 10a and 10b			L			
11 Net income from unrelated busines activities not included in line 10b whether or not the business is regularly carried on	5					
12 Other income Do not include gain or loss from the sale of capital						
assets (Explain in Part VI) 13 Total support (Add lines 9, 10c, 11, and 12)	,		 			
14 First five years. It the Form 990 is		's first, second, the	rd, fourth, or fifth t	ax vear as a secti	on 501(c)(3) organi	zation.
check this box and stop here	or to o organization	o o ., o o o ,				▶□
Section C. Computation of Pu	blic Support Pe	ercentage	· · · · · · · · · · · · · · · · · · ·			
15 Public support percentage for 2014			column (f))		15	9
16 Public support percentage from 20		•			16	9
Section D. Computation of Inv						
17 Investment income percentage for	2014 (line 10c, cotu	nın (1) divided by l	ne 13, column (f))		17	9
18 Investment income percentage from					18	9
19a 33 1/3% support tests - 2014 If the			on tine 14, and tine	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box	and stop here. The	e organization qua	lifies as a publicly	supported organi	zation	▶□
b 33 1/3% support tests - 2013 If the	ne organization did i	not check a box o	n line 14 or line 19:	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, c	heck this box and s	top here. The org	anization qualifies	as a publicly supp	oorted organization	· ▶ <u></u>

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E, If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section	Δ	ΔII	Supporting Organizations
Section	м.	MII	Supporting Organizations

ec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If histonic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
2			1	
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	2		
_	organization was described in section 509(a)(1) or (2)		_	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2-		
	(b) and (c) below	3a		
ь	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	·		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3 b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes," explain in p_{BR} V_I what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
h	Type I or Type II only. Was any added or substituted supported organization part of a class already			
Ü	designated in the organization's organizing document?	5b		
_	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
0	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class		}	
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	6		
_	Part VI.	-		
7	Did the organization provide a grant, loan compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35 percent	_		
_	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7	\vdash	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
_	If "Yes," complete Part I of Schedule L (Form 990)	8		—
9a	Was the organization controlled directly or indirectly at any time during the lax year by one or more		1	
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described		1	
	in section 509(a)(1) or (2))? If 'Yes," provide detail in part VI.	9a	H	
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which	-0.		
	the supporting organization had an interest? If "Yes," provide detail in Part VI	9b_	 	
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
_	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	\vdash	
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
	organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings)	10b		L

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A	(Form 9 9 0 or 990 i	EZ) 2014 NATIC	NAL LEGAL	AND	POLICY	CENTER	52-1750188 Page 8
Part VI	Supplementa	I Information.	Provide the explana	ations reo	ured by Part	II. line 10. Part II. lir	52-1750188 Page 8 ne 17a or 17b, and Part III, line 12
	Also complete the	is part for any additi	onal information (See instru	ictions)	.,	
	Also complete in	is part for any additi	onarmonnation t	See manu	ictions)		
					· · · · · · · · · · · · · · · · · · ·		
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					<u>-</u>		
	-						

SCHEDULE D

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.los.gov/fprm990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 52-1750188

-	NATIONAL LEGAL AND POLICY CENTER	52-1/50166
Pai		Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, fine 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised to	ınds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only
	for charifable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confi	
	impermissible private benefit?	Yes No
Pai		
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
'	Preservation of land for public use (e.g., recreation or education) Preservation of a historical	ly important land area
	Protection of natural habitat Preservation of a certified	· ·
	Preservation of open space	mstoric structure
2		page a state and the last
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a	conservation easement on the last
	day of the tax year	Held at the End of the Tax Year
	Total autobased assessments	
	Total number of conservation easements	2a
	Total acreage restricted by conservation easements	26
	Number of conservation easements on a certified historic structure included in (a)	2c
đ	Number of conservation easements included in (c) acquired after 8/17/06, and not on a histonic structure	
_	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	anization during the tax
	year >	
4	Number of states where property subject to conservation easement is located >	
5	Does the organization have a written policy regarding the penodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	└ Yes └ No
6	Stalf and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	
	and section 170(h)(4)(B)(ii)?	└ Yes
g	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the d	rganization's accounting for
	conservation easements	G: ''
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, tine 8	· · · · · ·
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	balance sheef works of art, hisforical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items	
	(i) Revenue included in Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	▶ s
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain	n, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) refating to these ifems	
a	Revenue included in Form 990, Part VIII, lino 1	► S
b	Assets included in Form 990, Part X .	▶ s

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Schedule D (Form 990) 2014

Sche		L LEGAL AN							50188	
Par										
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following that	t are a s	ignificant	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	d		Loan or exc	hange progra	ams				
ь	Scholarly research	е		Other	_					
С	Preservation for future generations							-		
4	Provide a description of the organization's co	ollections and explain	n how th	ney further l	the organizati	on's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of								_	
	to be sold to raise funds rather than to be m							1	Yes	□ No
Par	t IV Escrow and Custodial Arran					'Yes" to	Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for	contribution	ns or other as	sets not	ıncluded	_	_	
	on Form 990, Part X7								Yes	☐ No
ь	If "Yes " explain the arrangement in Part XIII	and complete the fo	llowing t	table						
		·	_						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
ſ	Ending balance						11		***	
	Did the organization include an amount on F	orm 990. Part X. line	21. for (escrow or c	ustodial acco	unt liabi	lity?		Yes	No
	If "Yes," explain the arrangement in Part XIII						•			
Par							0			
		(a) Current year	(b) P	nor year	(c) Two year	s back	(d) Three y	ears back	(e) Four ye	ars back
1a	Beginning of year balance	1								
	Contributions				1.	i				
	Net investment earnings, gains, and losses									
c	Grants or scholarships									
d	Other expenditures for facilities				 					
e	·]				
	and programs				 	···				
ī	Administrative expenses				 				 	
g	End of year balance		- 4-0-4		a) bald on				L	
2	Provide the estimated percentage of the cur	rent year end balanc		g, column (a)) nelo as					
a	Board designated or quasi endowment		_%							
	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	red for t	he organiz	zation	<u></u>	
	by									es No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Sche	dule R?					3 b	
4	Describe in Part XIII the intended uses of the		wment	funds						
Par										
	Complete if the organization answere	- 1								
	Description of property	(a) Cost or o			t or other		ccumulate		(d) Book v	alue
		basis (investr	nent)		(other)	de	preciation		<u> </u>	050
	Land				1,050		164 4	06	257	,050.
	Buildings			 5	06,550.		154,4	00.	352	,004.
	Leasehold improvements			ļ,	ב ייי		54,6	01	- 1	,093.
	Equipment				55,777.		24,0	04.		,093.
	Other (Column (d) must s	au al Farm 000 G	V 0-1	mo (D) (10-1			_	411	,207.
rota	. Add lines 1a through 1e (Column (d) must e	циаг голп ээо, Рап	A, COIUI	m (b), iine	IUC J			>	374	, 2010

Schedule D (Form 990) 2014

Schedule	n	(Form	990)	2014
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Ì	Part VII Investments - Other Securities.	

Complete if the organization answered "Yes" to	Form 990, Part IV, line	11b See Form 990, Part X, line 12				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end of year market value				
(1) Financial derivatives						
(2) Closely held equity interests						
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶						

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to	o Form 990, Part IV, line	11c See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end of year market value
(1)		
(2)	·	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal (Col (b) musl equal Form 990, Part X, col (B) line t3)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) ASSETS UNDER SPLIT INTEREST AGREEMENTS	183,469.
(2) TAX RECEIVABLE	13,453.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	106.000
Total (Column (b) must equal Form 990, Part X, col. (B) line 15.)	▶ 196,922.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITIES UNDER SPLIT-INTEREST	
(3) AGREEMENTS	89,597.
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 89,597.

² Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2014

2014.04020 NATIONAL LEGAL AND POLICY C CH500281

Schedule D (Form 990) 2014	NATIONAL	LEGAL AND	POLICY	CENTER	52-1750188 Page 5
Schedule D (Form 990) 2014 Part XIII Supplemental I	nformation (continue	ed)			
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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Information about Schedule J (Form 990) and its instructions is at www.im.gov/form990.

Open to Public Inspection

OMB No 154S-9047

Name of the organization

Department of the Treasury Internal Revenue Service

NATIONAL LEGAL AND POLICY CENTER

Employer identification number 52-1750188

۲	art Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			l
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross up payments Health or social club dues or initiation lees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	. !		
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	. !		
	establish compensation of the CEO/Executive Director, but explain in Part III	. !		
	Compensation committee Written employment contract	. !		
	Independent compensation consultant Compensation survey or study	. !		
	X Form 990 of other organizations X Approval by the board or compensation committee	. !		
4	During the year, old any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	. !		
	organization or a related organization	.		
а	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	. !		
	contingent on the revenues of	. !		
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III	,		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	conlingent on the net earnings of			
а	The organization?	6a		Х
þ	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958 4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Populations postion 53 4058 5(c)2	Q		l

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Schedule J (Form 990) 2014

NATIONAL LEGAL AND POLICY CENTER

52-1750188

Page 2

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014 NATIONAL LEGAL AND POLICY CENTER 52-1750188

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies I/ additional space is needed.

For each individual whose compensation must be reported in Schedule J report compensation from the organization on row (i) and from related digunizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990. Part VII

Note. The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990. Part VII. Section A. line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W 2 and/or 1099 M	SC compensation		(D) Nontaxable			
		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)() (D)	in column (B) reported as deferred in pilor Form 990	
(., 4E 1274 F BOENY	(1)	225,000.	0.	0.	23,000.	12,969.	260,969	0.	
CHAIRMAN	(11)	0.	0.	0.	0.	0.			
12) PETTR T. PLAHERTY	(1)	227,822.	0.	0.	23,000.	15,979.	266,801.	0.	
PRESIDENT/DIRECTOR	[69]	0.	0.	0.	0.1	0.	0.	0.	
	(0)								
	(0)						T	1	
	(1)								
	(0)						l ———		
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Screoule J (Form 990) 2014	NATIONAL LEGAL AND POLICY CENTER	52- <u>1750188</u>	Page 3
Part III Supplemental Informa	ation		
Provide the information, explana-	ion or descriptions required for Part I lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6z, 6b, 7, and 8, and for Part	t II. Also complete this part for any additional information	ı
			
			
			
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		Schadula 1/Form	000/201

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SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

OMB No 1515-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990

Name of the organization

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 | Inspection | Employer Identification number

Open To Public

NATIONAL LEGAL AND POLICY CENTER

52-1750188

Pai	t Types of Property			_					
		(a) (b) (c) Check if Number of Noncash contributions or amounts report items contributed Form 990, Part VI			orted on	(d) Method of determining noncash contribution amounts			
	A. Made of or		items contributed	Form 990, Pan	VIII, line 1g	 			
1	Art Works of art								
2	Art Historical treasures	<u> </u>							
4	Art Fractional interests			*		 			
5	Books and publications					 			
6	Clothing and household goods Cars and other vehicles								
7	Boats and planes	ļ				 			
8		-							
9	Intellectual property	Х	5	72	,705.	FMV ON	THE	DATE	RECE
_	Securities Publicly traded		<u> </u>		,			<u> </u>	
10	Securities Closely held stock								
11	Secunties Partnership, LLC, or								
40	trust interests								
12	Secunties Miscellaneous								
13	Qualified conservation contribution								
	Historic structures							-	
14	Qualified conservation contribution. Other					 			
15	Real estate Residential					 			
16	Real estate Commercial	-	<u> </u>			 			
17	Real estate Other								
18	Collectibles					 			
19	Food inventory					 			
20	Drugs and medical supplies							_	
21	Taxidermy					 			
22	Historical artilacts								
23	Scientific specimens		 						
24	Archeological artilacts					 			
25	Other ()			· · · · · · · · · · · · · · · · · · ·					
26	Other ()					 			
27	Other ()								
28_	Other (<u> </u>	<u> </u>	L.,		L			
29	Number of Forms 8283 received by the organi		•						
	for which the organization completed Form 82	83, Part IV,	Doneo Acknowlec	genient	29				
									es No
30 a	During the year, old the organization receive b	-				-			
	must hold for at least three years from the dat		al contribution, and	d which is not red	quired to be	used for			٠,
	exempt purposes for the entire holding period	?						30a	X
	If 'Yes," describe the arrangement in Part II								٠,
31								31	<u>_x</u> _
32a	Does the organization hire or use third parties	or related o	rganizations to sol	icit, process, or s	eti noncash	ı			
	contributions?							32a	<u> </u>
	If "Yes," describe in Part II	. , .							1
33	If the organization did not report an amount in	column (c)	or a type of prope	rty for which colu	ımn (a) is cl	necked,			
	describe in Part II				-			<u></u> _	
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	IO .		Sch	iedule M ((Form 9	90) (2 0 14)

Schedule M	(Form 990) (2014)	NATIONAL	LEGAL	AND	POLICY	CENTE	R	52-1750188	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information. I, column (b), the	Provide the number of c	informat ontribut	ion required b ions, the numb	y Part I, line per of items	s 30b, 32b, and 33 received, or a com	, and whether the organiz bination of both Also con	
	This part to any ac								
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Schedule M (Form 990) (2014)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

OMB No 1545 0047 Open to Public

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization

Employer identification number

52-1750188 NATIONAL LEGAL AND POLICY CENTER FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INFORMATION ON NONPARTISAN ISSUES RELATING PRIMARILY TO ETHICS AND ACCOUNTABILITY, INCLUDING THE CODE OF ETHICS FOR GOVERNMENT SERVICES. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE LEGAL SERVICES ACCOUNTABILITY PROJECT. THIS PROJECT FOCUSES ON THE ACCOUNTABILITY OF THE LEGAL SERVICE GROUPS THAT ARE FUNDED BY THE GOVERNMENT FOR THE PURPOSE OF PROVIDING CIVIL LEGAL ASSISTANCE TO THE THE CENTER INVESTIGATES THE ACTUAL USE OF THESE FUNDS AND EXPOSES TO GOVERNMENT OFFICIALS AND THE GENERAL PUBLIC DISCREPANCIES AND ABUSES. INCLUDING GRANTS OF \$ 0. EXPENSES \$ 23,766. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS DISTRIBUTED TO EACH DIRECTOR OF THE NLPC. IF ANY DIRECTOR WOULD LIKE CHANGES MADE, THOSE CHANGES ARE COMMUNICATED TO PETER FLAHERTY, PRESIDENT OF THE NLPC. FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY COVERS ALL DIRECTORS AND OFFICERS AND IS MONITORED BY THE BOARD MINUTES WHICH ARE REVIEWED AND MAINTAINED BY THE THE BOARD OF DIRECTORS REVIEWS EACH TRANSACTION TO BOARD OF DIRECTORS. COME BEFORE THE BOARD FOR POTENTIAL OR ACTUAL CONFLICTS OF INTEREST. POTENTIAL OR ACTUAL CONFLICTS (PAST, PRESENT, OR FUTURE) ARE IDENTIFIED, THE PERSON DETERMINED TO HAVE A CONFLICT IS RECUSED FROM DELIBERATIONS AND THE IDENTIFIED CONFLICTS OF INTEREST AND APPROPRIATE RECUSALS ARE

432211

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Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization NATIONAL LEGAL AND POLICY CENTER	Employer identification number 52-1750188
FORM 990, PART XII, LINE 2C:	
PROCESS HAS NOT CHANGED SINCE PRIOR YEAR.	
	to and to
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